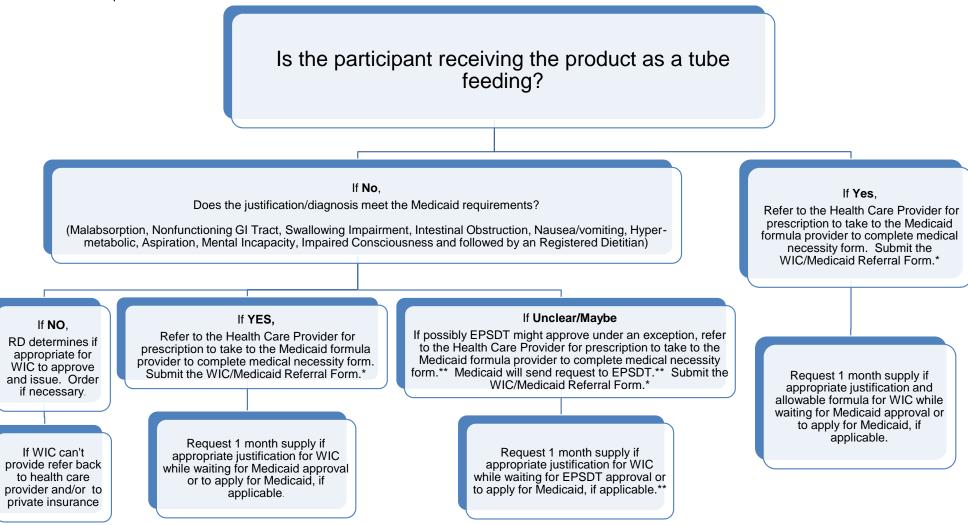
Montana WIC/Medicaid Nutrition Referral Flowsheet

Montana Medicaid and Montana WIC are requesting this process when considering the issuance of formula, exempt formula and medical foods. Have the participant sign a release so that WIC can share this information with Montana Medicaid. The official request for Medical Necessity must come from the Health Care Provider but this referral from WIC allows for complete processing once the request is received from the Health Care Provider.



^{*}Fax the completed WIC/Medicaid Nutrition Referral Form to Medicaid DME Officer at 406-444-1861. Scan a copy into the participant's chart.

^{**}EPSDT (Early Periodic Screening, Diagnostic and Treatment Services) for information http://medicaidprovider.mt.gov/04 and General Provider Manual p 3.1 or call 406-444-0950.